

August 20, 2018

County Supervisor Kristin Gaspar 1600 Pacific Highway, Room 335 San Diego, CA 92101

Dear County Supervisor Gaspar:

Saved In America is a non-profit organization consisting of former law enforcement officers and Navy SEALS-turned licensed, insured private investigators. We are also one of only 9 NGOs appointed to the Federal U.S. Human Trafficking Exchange Group.

At no charge to families, we assist law enforcement to locate missing and runaway children – one of the groups most vulnerable to sexual exploitation. For victims of exploitation, we also help in procuring legal representation, safe housing, and rehabilitative therapy. Since 2014 we have assisted in locating and recovering 82 children, of which 60% were found before falling victim to traffickers. We have also helped Casa De Amparo with weekend surveillance to decrease and nearly diminish the number of AWOLs.

Last year when we applied for the NRP grant in October, we had recovered 46 children since 2014. In the last 10 months alone, we have recovered 36 more children. The grant of \$30,000 awarded on 12/5/2017 from your office and \$40,000 awarded on 11/14/2017 by Supervisor Hom's office for surveillance and safety equipment and software, has made an enormous impact on our operations. This critical equipment has enabled us to increase the number of recoveries dramatically in a short period of time.

We would like to formally apply for a grant of \$240,00 (total project) from the Neighborhood Reinvestment Program 2018 for a mobile command center. This will enable us to centralize our efforts and essential equipment when on an operation, have safe place for family members to remain during an operation, as well as cut down on much of our travel expenses. It will help us increase the number of cases we handle and ultimately help find more children. Because our operations can take place anywhere in the county, we are requesting \$80,000 from your district as well as district 5 and district 2. We would plan to spend these funds in the next three months.

Please see itemized costs below for mobile command center:

*Class 'A' RV - \$212,500: Includes tax, license, registration & insurance (\$17500), extended warranty (\$5,000), extended maintenance agreement (\$5,000), custom logo/paint (\$10,000)

*Electronic Equipment - \$27,500: Includes radio repeater extender (\$10,000), WIFI satellite extended coverage, software & antennas (\$10,000), anti-piracy software for repeater & WIFI system (\$5,000)

*Enhanced physical security system - \$2,500

Thank you so much for your time and consideration. Please feel free to reach out via email or phone if you have any questions or need more information.

Best Regards,

Joseph Travers
Executive Director

Saved in America

P O Box 270, Oceanside CA 92049

760-348-8808

www.savedinamerica.org 501(c)3 EIN: 33-0916040



COUNTY OF SAN DIEGO

APPLICATION FOR FISCAL YEAR 2018/19 NEIGHBORHOOD REINVESTMENT PROGRAM GRANT

READ INSTRUCTIONS FIRST

ALL FIELDS MUST BE COMPLETED AS APPLICABLE

ELIGIBILITY: Only non-profit or government/public agencies operati What is the legal status of your organization? Non-Profit Corporation Government/Public Age	
Federal Tax Identification Number (TIN or EIN): 33-0916040	Organization Name: National Christian Information Center Inc.
	(Must match name filed under Federal Tax Identification Number)
Street Address	Mailing Address Same as Street Address
Address: PO Box 270	Address: PO Box 270
City: Oceanside State: CA Zip: 92049	City: Oceanside State: CA Zip: 92049
Popular Name or d.b.a.: Saved In America	
Supervisorial District (based on street address of organization):] 1
Title of Grant Request: Mobile Command Center	
Contact Person (Individual who will sign the grant agreement and b	e responsible for the expenditure of the funds)
Name: Joseph Travers	Title: President
Telephone Number: 760-348-8808 Fax Number:	Email: info@savedinamerica.org
Grant Administrator (Individual who will sign the grant agreement	
(This individual must be different from the Con	
Name: Alfred Moreno	Title: Treasurer
Telephone Number: 760-348-8808 Fax Number:	Email: info@savedinamerica.org
PROJECT LOCATION (see instructions)	
Street Address: county wide	
Community to be Served: All of San Diego County	
For Capital Projects:	
Owner of Project Site:	
Name of person or entity responsible for project site mainte copy of any maintenance agreements or commitment letter	
Estimated Total cost of the project: \$240,000	(Provide verifiable cost estimates with this application)
Total Amount requested from the County (minimum \$3,500):	Estimated project completion date 3 3 1 7
Have you made any expenditures to date for this project that y IMPORTANT: This information will be used to determine the effect	
If YES, the date of the first expenditure: Month:	Year:
If NO, when do you expect to start the project: Month: $_{ m NOVe}$	mber Year: 2018



COUNTY OF SAN DIEGO

APPLICATION FOR FISCAL YEAR 2018/19 NEIGHBORHOOD REINVESTMENT PROGRAM GRANT

ORGANIZATION NAME: National Christian Information Center Inc.
TITLE OF GRANT REQUEST: Mobile Command Center

Purpose of grant: (Describe the purpose for which you are seeking grant funding. If your request consists of multiple components, please describe each item in priority order and indicate the associated amount requested. A higher priority shall be given to requests for capital projects and/or one-time expenses.)

The purchase of a RV (mobile command center) and critical electronic equipment will make our operations much more effective, as well as cut team costs for travel and accommodate family members while on an operations. This will also enable us to increase the number of missing child cases that we can handle and ultimately help to locate and recover more children before they become victims of sex trafficking. Please see itemized costs below:

*Class 'A' RV: \$212,500

-Includes:tax,license,registration,insurance (\$17500), extended warranty(\$5,000),extended maintenance agreement(\$5,000),custom logo/paint(\$10,000)

*Electronic Equipment: \$27,500

-Includes:radio repeater extender(\$10,000), WIFI satellite extended coverage software &

antennas (\$10,000), anti-piracy software for repeater & WIFI system (\$5,000)

Enhanced physical security system: \$2,500

OUESTIONS 1 & 2 WILL BE USED TO HELP EVALUATE YOUR PROPOSAL

1. Briefly describe how your organization measures or plans to measure the (positive) impact of activities/operations proposed in the community. Provide an estimate of how many people will be served.

Since 2014, Saved In America has assisted in locating and recovering 82 runaway and missing In just the last year alone, we have recovered 38 of which 60% were recovered before falling victim to sex traffickers. These children were recovered at a cost of \$5,500 per recovery, but these efforts are done at no charge to families or law enforcement. Having the mobile command center will enable us to expand our efforts and be much more flexible and effective with our manpower. In addition, it will be a safe and comfortable place for family members to stay before, during and after an operation. We believe we can increase the number of operations we take on by 50-60%.

2. What other funding partners/sources do you have for this project?

Not confirmed yet, but will seek sponsors. Also, some proceeds from annual fundraising event will go toward this project.

2 of 4



COUNTY OF SAN DIEGO

APPLICATION FOR FISCAL YEAR 2018/19 NEIGHBORHOOD REINVESTMENT PROGRAM GRANT

ORGANIZATION NAME: National Christian Information Center Inc. TITLE OF GRANT REQUEST: Mobile Command Center

	PRIOR YEAR ACTUALS	CURRENT YEAR
FINANCIAL STATEMENT	July 1, 2017 Through June 30, 2018	July 1, 2018 Through June 30, 2019
Type in Your "Fiscal Year" if different	Through	Through
COUNTY COMMUNITY ENHANCEMENT GRANTS	\$0	\$0
COUNTY NEIGHBORHOOD REINVESTMENT GRANTS (Formerly Community Projects Grants)	\$70,000	\$240,000
CITY FUNDING City Name:	\$0	
OTHER REVENUES (Please Itemize below)		
Funds raised at annual event and other individual and corporate donations	\$237,239	\$195,352
TOTAL REVENUES (If more than \$50,000, attach IRS form 990 or 990EZ. If \$50,000 or less, attach IRS form 990-N e-postcard))	\$307,239	\$435,352
TOTAL EXPENDITURES	\$202,437	\$283,507
OPERATING SURPLUS (DEFICIT)	\$104,802	\$151,845

RESOLUTION OF THE BOARD OF DIRECTORS

	0	F National	Christia	n Inform	ation Cent	er Inc.		
				(Or	ganization name)			
	WH	EREAS, the Co	unty of San (Diego Neigh	borhood Rein	vestment Pro	gram provides	funding for
noi	n-profit	corporations	for certain sp	ecified purp	oses; and			
	WH	IEREAS, the N	ational C	hristian	Informati		Inc.	
wa	nts to fi	le an applicati	on with Cour	nty of San D	Organizati iego for Neigh	_{lon name)} borhood Reir	nvestment Prog	ram funding.
		NOW, THE	REFORE, BE I	T RESOLVED	that the Boar	d of Directors	of	
Na	tiona	l Christia		ation Cer	iter Inc.		•	
					n Informat cy under the la		er Inc. te of California;	_ is a non-profi
					ith the County the County's 2		for Neighborh cal year; and	ood
					sign a grant ag the 2018-2019		n the County of	San Diego for
1. Print	Name:	Joseph Trav	rers			Signature:	000	
Title:	Presid	ent					13	
2. Print	: Name:	Alfred More	eno	11.00		Signature	Th	
Title:	Tresur	er					1. 1	
3. Print	t Name:	Joshua Tra	vers			Signature:	1	
Title:	Secret	ary				D.	Herpe	
			Adopted on 1	this 13th	day of August	, 20	19	
			J	Secreta	iry, Board of Direc	tors		
				~~~~	,,			

Form **990-EZ** 

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A F	or the 2	2017 calenda	ar year, or tax year beginning January 1, , 2017, and ending	Dece	ember	31 , 20 17
Вс	heck if app	plicable:	C Name of organization 6	D Emplo	yer ide	entification number
	vddress ct	nange	National Christian Information Center		3:	30916040
_	lame char	-	Number and street (or P.O. box, if mail is not delivered to street address)  Room/suite	E Telepi	hone nu	ımber
~	nitial retun	n v/terminated	PO Box 270		94	9-310-8100
_	mended i		City or town, state or province, country, and ZIP or foreign postal code	F Grou	p Exer	nption
	Application		Oceanside, CA 92049	Num	ber 🕨	- 17
G A	ccounti	ing Method:	☑ Cash ☐ Accrual Other (specify) ► H	Check >	- 🗆 it	the organization is not
1 W	ebsite:	:► www.				ach Schedule B
J Ta	ax-exem	pt status (che	eck only one) — 🗹 501(c)(3) 🔲 501(c) ( ) ◀ (insert no.) 🗌 4947(a)(1) or 🔲 527	(Form 99	90, 990	-EZ, or 990-PF).
KF	orm of	organization:	☐ Corporation ☐ Trust ☐ Association ☐ Other			
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total			
(Par	t II, colu	umn (B) belov	v) are \$500,000 or more, file Form 990 instead of Form 990-EZ		<b>\$</b>	
Pa	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instruc	tions	for Part I)
		Check if	the organization used Schedule O to respond to any question in this Part I			
1	1		ons, gifts, grants, and similar amounts received		1	256226
?1	2	Program s	ervice revenue including government fees and contracts	[	2	0
?i	3	Membersh	ip dues and assessments	[	3	0
?	4	Investmen	t income		4	0
	5a	Gross amo	ount from sale of assets other than inventory 5a	0		
	b	Less: cost	or other basis and sales expenses	0		
	C	Gain or (lo	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0
	6		nd fundraising events			
	а	Gross inc	ome from gaming (attach Schedule G if greater than			
9		\$15,000)		0		
Revenue	ь	Gross inco	ome from fundraising events (not including \$ 0 of contribution	ıs		
Re	l	from funda	raising events reported on line 1) (attach Schedule G if the			
	1	sum of suc	ch gross income and contributions exceeds \$15,000)   6b	0		
	c	Less: direc	ct expenses from gaming and fundraising events 6c	0		
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and 6b and sul	otract		
		line 6c)			6d	0
	7a	Gross sale	s of inventory, less returns and allowances	0		
	b		of goods sold	0		
	С	Gross pro	fit or (loss) from sales of inventory (Subtract line 7b from line $\overline{7a}$ )		7c	0
	8	Other reve	nue (describe in Schedule O)		8	0
_	9	Total reve	enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	. ▶	9	0
	10	Grants and	d similar amounts paid (list in Schedule O)		10	00
	11	•	aid to or for members		11	0
es es	12		ther compensation, and employee benefits 🔯		12	0
SU	13	Profession	nal fees and other payments to independent contractors 🖾		13	109511
Expenses	14	Occupano	y, rent, utilities, and maintenance		14	11153
û	15	Printing, p	ublications, postage, and shipping		15	1725
	16		enses (describe in Schedule O) 🔟		16	39751
	17	Total exp	enses. Add lines 10 through 16	. ▶	17	0
ço.	18	Excess or	(deficit) for the year (Subtract line 17 from line 9)		18	0
Sel	19		s or fund balances at beginning of year (from line 27, column (A)) (must agree			
As		-	ar figure reported on prior year's return)		19	0
Net Assets	20		nges in net assets or fund balances (explain in Schedule O)		20	0
_	21	Net assets	s or fund balances at end of year. Combine lines 18 through 20	. ▶	21	0
For	Paper	work Reduc	tion Act Notice, see the separate instructions. Cat. No. 10642			Form 990-EZ (2017)

	Form 99	90-EZ (201	7)					Page Z
	Part		alance Sheets (see the instructions for		A:			
		C	heck if the organization used Schedule (	O to respond to an				
						A) Beginning of year	-	(B) End of year
	22		savings, and investments			31042.75 0	<u>22</u> 23	105184.42
	23 24		nd buildings		· · · · ·		23 24	0
	24 25		issets			31042.		105184
	26		iabilities (describe in Schedule O)				26	0
	27		sets or fund balances (line 27 of column (			31042		105184
7	Part		tatement of Program Service Accomp			art III)		
			heck if the organization used Schedule	•		,		Expenses
	What	is the or	ganization's primary exempt purpose?	Rescue childrene fro	m trafficking			equired for section I(c)(3) and 501(c)(4)
	Descr	ribe the	organization's program service accomplisi	hments for each of	its three largest or	ogram services.	8.	panizations; optional for
	as me	easured	by expenses. In a clear and concise ma	inner, describe the	services provided	the number of	oth	ers.)
			fited, and other relevant information for each					
1	28	Rescue d	children kidnapped for sex trafficking. Estima	ted number of people	e benefitted: 32 child	ren rescued		
	Person .		N 10 10 10 10 10 10 10 10 10 10 10 10 10	1 1 6 • • Early No.				7,000
		(Grants S		ncludes foreign grau		▶ 🗆	28	a 71688
	29	NCIC: BI	bles and papmphlets for military. Estimated r	number of people bei	ientied: 750			
	1	(Grants	) If this amount i	ncludes foreign gra	nte check here	▶ □	29	a 14204
			Assist in setting up a safe house for girls res			• • • •	23	a 14204
	- 50		Woold in cerning ab a cric meach tot 3 months					
	į	(Grants	) If this amount i	ncludes foreign gra	nts, check here .	▶ 🗆	30	a 7927
		-	ogram services (describe in Schedule O)					
		(Grants	\$ ) If this amount i	ncludes foreign gra	nts, check here .	▶ □	31	а
	32	Total pr	ogram service expenses (add lines 28a th	nrough 31a)			3	2
	Part		ist of Officers, Directors, Trustees, and Key		•		nstr	uctions for Part IV)
			Check if the organization used Schedule	O to respond to ar			-	<u> </u>
				(b) Average	(c) Reportable 🔀 compensation	(d) Health benefits, contributions to employ	ee (	e) Estimated amount of
			(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)		- [	other compensation
			To action Discount		(ii not paid, enter -o-)	deterred compensatio	+	
	Jose	pn rrave	rs - Executive Director	40	11550			0
	Frod	Morono	Secretary	40	11330	<u> </u>	7	
	rieu	MOTERIO -	- Couldwin y	1				0
	losh	ua Trave	rs - Treasurer				7	
				10			o	0
	Alexai	ndria Phil	ips - Board Member and Legal Counsel				7	0
				40	44,660		0	
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				- Park Server Lands			_	
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	Part '					,
		instructions for Part V.) Check if the organization used Schedule O to respond to any question in this				
	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		Yes	No	
?"	34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		-	2
		copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		~	
	35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		/	•
	b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	35b		4	8
	36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35c		~	
	37a	during the year? If "Yes," complete applicable parts of Schedule N	36		/	?
	b	Did the organization file Form 1120-POL for this year?	37b		1	
	38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	00		無意	E7
	b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b	38a		V	2
	39	Section 501(c)(7) organizations. Enter:				
	а	Initiation fees and capital contributions included on line 9				
	b 40a	Gross receipts, included on line 9, for public use of club facilities				
	b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		~	E
	C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
	d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization				
	e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		~	
	41	List the states with which a copy of this return is filed ▶ California				_
	42a		61549			
	b	Located at ► 1807 Shaytin Loop, Antioch ,TN ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	370	Yes	No	-
		a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	1.00	1	-
		If "Yes," enter the name of the foreign country: ▶				
		See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
	C	At any time during the calendar year, did the organization maintain an office outside the United States? .  If "Yes," enter the name of the foreign country:	42c		V	2
	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	• •		<b>▶</b> □	_
	44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No	il.
	b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		~	Statut
	c d	Did the organization receive any payments for indoor tanning services during the year?	44c		V	_
		explanation in Schedule O	44d	_	V	
	45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	100000	~	10
	ט	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		~	
					<u> </u>	_

om 99	0-EZ (2017)						Р	age 4	
	Did the consideration of the although the contract	II Al II II AI II II					Yes	No	
46	Did the organization engage, directly or in to candidates for public office? If "Yes," of	idirectiy, in political c	ampaign activities on	behalf of or	n opposit				-
Part			raiti	• • • •	• • •	. 46		~	
dill	All section 501(c)(3) organization		stions 47–49h and	52 and con	nlete the	a tahlas f	or line	96	
	50 and 51.	o maor anomor quo	310110 47 405 414	o <u>-</u> , and oon	ipicto tin	e tables it	א ווו וכ	50	
	Check if the organization used Scl	hedule O to respond	to any question in t	nis Part VI				П	
	<u> </u>						Yes	No	
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) electio					~	is a
48	Is the organization a school as described in	n section 170(b)(1)(A)(ii	)? If "Yes," complete \$	Schedule E				V	E
49a	Did the organization make any transfers to	o an exempt non-cha	ritable related organiz	ation?		. 49a		V	-
b	If "Yes," was the related organization a se							~	
50	Complete this table for the organization's	five highest compens	sated employees (oth	er than office	rs, directo	ors, trustee	s, an	d key	
	employees) who each received more than	1 \$100,000 of comper	sation from the organ	nization. If the	ere is non	e, enter "N	one."		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health b contributions to benefit plans, a	employee nd deferred	(e) Estimate			
	***		(,	compens	ation	100.0			
ione				_					
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				-					
		<u> </u>		<del> </del>					
				1					
f 51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the organization	's five highest compe	ensated independent	contractors	who each	received	more	than	
-	(a) Name and business address of each independ	dent contractor	(b) Type of serv	rice	(c)	Compensati	on		
none									
	***************************************		W						
	·								
- d	Total number of other independent costs		0100 000						
52	Total number of other independent contra Did the organization complete Schedu	_	· · · · · · · · · · · · · · · · · · ·			<u> </u>			
JŁ						na .▶∐ Yes	П	No	
Inder t	penalties of perjury, I declare that I have examined this								
rue, co	rrect, and complete Declaration of preparer (other tha	n officer) is based on all info	ormation of which preparer	has any knowled	997	nowiedge and	ı Dellet,	, къ	
				17	1/A-	<del>, 22,</del>	20	0/8	•
Sign Here	Signature of officer  Type or print name and title	justy -	PRESIDE	Date Date					
	In	Preparer's signature	l n ₂	ate		. PTIN			•
Paid	3		De		Checkself-emplo	l if			
	parer				<u> </u>	ува			
Use	Only Firm's name Firm's address F	·			s EIN ►				
May t	he IRS discuss this return with the prepare	r shown above? See	instructions		e no.	► ☐ Yes		No	
				• •		- 1-1 160	<u> </u>		



July 11, 2014

Re: National Christian Information Center, Inc. dba Saved in America (a California Non-Profit organization)

To whom it may concern:

National Christian Information Center, Inc.:

- Was incorporated on June 14, 2000. Articles of Incorporation attached.
- Is currently in "active status" with the California Secretary of State as of July 11, 2014.
- Obtained federal tax-exempt status, effective June 14, 2000, under section 501(c)(3) of the Internal Revenue Code. Confirmation letter dated October 12, 2007 attached.
- Obtained California state tax-exempt status, effective June 14, 2000, under section 23701d of the California Revenue and Taxation Code. Confirmation letter dated February 10, 2005 attached.
- Contributions to this organization are deductible under Section 170 of the Internal Revenue Code.
- Obtained a California sales tax exemption, effective April 2005, in accordance with Section 254.6 of the California Revenue and Taxation Code. Exemption attached.
- Filed a dba on May 21, 2014, doing business as Saved in America. Proof of filing attached.

If I may be of any further assistance regarding this organization, please feel free to contact me at 949-429-6800.

Respectfully yours,

Dale R. Howe Certified Public Accountant

Enclosures

30448 Rancho Viejo Road ■ Suite 210 ■ San Juan Capistrano, CA 92675 ■ 949-429-6800 ■ fax 949-429-6801

Form Instruction On Next Page

1600 PACIFIC HIGHWAY, SUITE 260 P.O. BOX 121750, SAN DIEGO, CA 92112-1750 (619) 237-0502

Return Mailing Address

Name: LegalZoom.com, Inc.

Address: 100 W. Broadway, Suite 100

Zip Code

Glendale, CA 91210

TYPE OF FILING AND FILING FEE (Check one)

Crty



Ernest J. Dronenburg, Jr. County of San Diego Recorder/County Clerk

BY MAIL FICTITIOUS BUSINESS NAME STATEMENT

# 2014-014108

MAY-21-2014

FILED
Ernest J. Dronenburg, Jr.
SAN DIEGO COUNTY CLERK
FEES: 42.00
EXPIRES: MAY-21-2019
DEPUTY: CDUENAS

\$5.00- EACH ADDITIONAL	ANGES IN THE FACTS FROM IS \$2.00 AND EACH ADDITIO . OWNER IN EXCESS OF ONE . BUSINESS NAME FILED ON	ORIGINAL FILING) NAL CERTIFIED COPY IS \$ OWNER	i3.00 IG BUSINESS AT SAME LOCATI	ION.	PE OF IDENTIFICATION PRO DRIVER'S LICENSE [ ] PASSPORT [ ]	MILITARY ID [] (A	AGENT CK
a. Saved in America	THAIRE(3):		PLEASE NOTE: YOU WILL BE RE	EQUIRED TO PRE	SENT A <u>VAUD PHOTO ID</u> TO	) FILE THIS STATEMENT IN	V PERSON.
b			19				
		Print F	ICTITIOUS BUSINESS NAME(s)				
(2) LOCATED AT: 517	Seagaze Drive #270		Oceanside	CA	San Diego	92049	
STREET A	DORESS OF PRINCIPAL PLACE OF BUSINESS (	. O. BOX NOT ACCEPTED)	Спу	STATE	COUNTY	Zip C	Ode
Mailing Address: _							
(3) THIS BUSINESS IS REG	ISTERED BY THE FOLLOV	/ING:					
1. NATIONAL CHRIS	STIAN INFORMATIO	N CENTER, INC.					
Full Name/Corp/LLC							
	e #270, Oceanside, (	CA 92049					
Residence Address (P. O. Box n	ct accepted)		City		State	Zip Code	
California							
If Corporation or LLC - Print Sta	te of incorporation/Organization						
2							
Fuli Name/Corp/LLC							
Residence Address (P. O. Box n	ot accepted)		City		State	Z p code	
If Corporation or LLC - Print Sta	te of incorporation/Organization						
(4) THIS BUSINESS IS C	ONDUCTED BY: (Check or	ne)					
☐ A. An Individu ☐ B. A Married ( ☐ C. A General F ☐ D. A Limited F	Couple Partnership	☐ E. Joint Venture ☐ F. A Corporation ☐ G. A Trust ☐ H. Co-Partners	☐ I. A Limited Liabi ☐ J. Limited Liabilit ☐ K. An Unincorpo ☐ L. State or Local	ty Partnership rated Associa	tion-Other than a Parti	nership	
(5) THE FIRST DAY OF BUS	INESS WAS:		OR IF NOT STARTED YET	, CHECK HER	E NOT APPLICAB	I F	
I declare that all information Professions code that the re	n in this statement is true as gistrant knows to be false is	nd correct. (A registrant guilty of a misdemeand	who declares as true any mar or punishable by a fine not to	torial matter	Burruant to Continue 17	1040 - 5-1	and
(6) REGISTRANT NAME NA	ATIONAL CHRISTIAN INF	ORMATION CENTER,	INC.	TITLE CE	0		
	10-	(PRINT)				al Partnership PRINT)	
REGISTRANT SIGNATURE	133		IF CORP OR LLC,	NAME JOSE	eph A. Travers		
If corporation, also print cor THIS STATEMENT WAS FILED WITH	porate title of officer. If LLC THE RECORDER/COUNTY CLERK (	, also print title of office IF SAN DIEGO COUNTY AS INC	er or manager. DICATED BY THE FILE STAMP ABOVE		(PRIN	rn)	

NOTICE: IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTIFIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS (5) FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

(SEE SECTION 14411 ET SEC., BUSINESS AND PROFESSIONS CODE).

IF SUBMITTING THE STATEMENT IN PERSON, THE REGISTRANT OR AGENT WILL BE ASKED TO PRESENT A VALID PHOTO ID FOR ALL THE FICTITIOUS BUSINESS NAME FILINGS.

IF SUBMITTING THE STATEMENT BY MAIL, THE REGISTRANT OR AGENT MUST ATTACH A COPY OF A VALID PHOTO ID OR A NOTARIZED CERTIFICATE OF ACKNOWLEDGEMENT

22859965 FORFRED - FILED

# Articles of Incorporation of

# National Christian Information Center, Inc.

(A California Nonprofit Corporation)

BILL JONES, Secretary of State

Article I

The name of the corporation is: National Christian Information Center, Inc.

### Article II

This corporation is a nonprofit religious corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Religious Corporation Law exclusively for religious purposes.

### Article III

The name and address of the corporation's initial agent of process is:

Jeffrey T. Osborn, Esq. 16152 Beach Blvd, Suite 250, Huntington Beach, CA 92647.

### Article IV

- (a) No substantial part of the activities of this corporation shall consist of carrying on propaganda or otherwise attempting to influence legislation except as permitted under Internal Revenue Code section 501(h), and this corporation shall not participate or intervene in (including publishing or distributing statements) any political campaign on behalf of any candidate for public office.
- (b) The property of this corporation is irrevocably dedicated to religious purposes, as set forth in Article 2. No part of the net earnings of this corporation shall inure to the benefit of its directors, trustees, officers, private shareholders or members, or to any individual.
- (c) On the winding up and dissolution of this corporation, after paying or adequately providing for the debts and obligations of the corporation, the remaining corporate assets shall be distributed to an organization (or organizations) that is organized and operated exclusively for religious purposes and that is tax exempt under Internal Revenue Code section 501(c)(3).

Dated: 5.16.00

effrey T. Osbojn, Incorporator

Apy OF

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 12 2007

NATIONAL CHRISTIAN INFORMATION CENTER INC 3000 W MACARTHUR BLVD STE 205 SANTA ANA, CA 92704 Employer Identification Number: 33-0916040 DLN: 17053156033007 Contact Person: JOSEPH R KENNEDY ID# 31647 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: September 30 Public Charity Status: 170(b)(1)(A)(i) Form 990 Required: Effective Date of Exemption: June 14, 2000 Contribution Deductibility: Yes Addendum Applies: No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

February 10, 2005 NATIONAL CHRISTIAN INFORMATION CENTER, INC. ENTITY ID: 2238906 Page 2

file Form 109 (Exempt Organization Business Income Tax Return) by the 15th day of the 5th month (4 1/2 months) after the close of your annual accounting period.

Please note that an exemption from federal income or other taxes and other state taxes requires separate applications.

THIS EXEMPTION IS GRANTED ON THE EXPRESS CONDITION THAT THE ORGANIZATION WILL SECURE FEDERAL EXEMPT STATUS WITH THE INTERNAL REVENUE SERVICE. THE ORGANIZATION IS REQUIRED TO FURNISH A COPY OF THE FINAL DETERMINATION LETTER TO THE FRANCHISE TAX BOARD WITHIN 9 MONTHS FROM THE DATE OF THIS LETTER.

K SANDBERG EXEMPT ORGANIZATIONS BUSINESS ENTITIES SECTION TELEPHONE (916) 845-3141

EO :

CALIFORNIA STATE BOARD OF EQUALIZATION ORGANIZATIONAL CLEARANCE CERTIFICATE FOR WELFARE OR VETERANS' ORGANIZATION EXEMPTION Organization Name and Mailing Address: National Christian Information Center, Inc. 3000 W. MacArthur Blvd., Ste. 205 CA 92704 Santa Ana THIS CERTIFICATE NUMBER MUST BE SUBMITTED TO A COUNTY WHEN FILING A CLAIM FOR WELFARE OR VETERANS! ORGANIZATION EXPLIPTION Organizational Information: 05/13/2008 Date of Certificate BOE Ex. No.: 20193 in accordance with section 254.6 of the Revenue and Taxation Type: Religious

# NOTICE TO ORGANIZATIONS GENERAL INFORMATION REGARDING WELFARE OR VETERANS' ORGANIZATION EXEMPTION

Corporate I.D. No.:

BOE-277-OC REV.1 (2-07)

Fiscal Year First Qualified:

2238906

04-05

Code, the Board has determined

that this organization meets the

organizational requirements of

section 214.

Your claim for an Organizational Clearance Certificate has been reviewed and a determination has been made that your organization meets the organizational requirements for exemption under section 214. A claim for the organizational clearance certificate will be mailed to the organization periodically to verify and update information. The claim form must be completed, signed, and filed with the Board, along with supporting documents, in order to maintain eligibility for the certificate. The Board may institute an audit or verification of the organization to determine whether the organization meets the organizational requirements of Revenue and Taxation Code section 214, as required by section 15618 of the Government Code. If you have any questions concerning the organizational requirements, you may contact the State Board of Equalization, Property and Special Taxes Department, County-Assessed Properties Division, Exemptions Section, at 916-445-3524.

The Assessor may not approve a property tax exemption claim on any property until the claimant has been issued a valid Organizational Clearance Certificate under section 254.6. The Assessor may deny a claim for the exemption, notwithstanding that the claimant has been granted an organizational clearance certificate. Claim forms for the welfare or veterans' organization exemption for property newly acquired by an organization may be obtained from the Assessor in the county where the property is located.

Annually, claims for the welfare and veterans' organization exemptions and supplemental affidavits, if required, must be filed on or before February 15 with the application to the applicable Assessor to avoid a late filing penalty under section 270. (A separate claim must be filed for each property location.) The Assessor will review all claims to determine that the organization continues to use its property for qualifying purposes and activities, as specified in section 214. Any questions relating to section 214 requirements regarding qualifying purposes and uses of the property may be directed to the Assessor.

#### SAN DIEGO COMMERCE

2652 4TH AVE 2ND FL, SAN DIEGO, CA 92103 Telephone (619) 232-3486 / Fax (619) 270-2503 Trigingly Fill ED at the

San Diego County Clerk's Office

MAR 1 9 2015

By: San Diego Commerce

NATIONAL CHRISTIAN INFORMATION C 517 SEAGATE DR #270 OCEANSIDE, CA - 92049

## PROOF OF PUBLICATION

(2015.5 C.C.P.)

State of California County of SAN DIEGO

) 55

Notice Type: FNS - FICTITIOUS BUSINESS NAME

Ad Description:

NCIC INVESTIGATIONS AND COMPUTER FORENSICS

I am a citizen of the United States and a resident of the State of California: I am over the age of eighteen years, and not a party to or interested in the above entitled matter. I am the principal clerk of the printer and publisher of the SAN DIEGO COMMERCE. a newspaper published in the English language in the city of SAN DIEGO, county of SAN DIEGO, and adjudged a newspaper of general circulation as defined by the laws of the State of California by the Superior Court of the County of SAN DIEGO, State of California, under date 12/13/1991. Case No. 631749. That the notice, of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to-wit:

SD#: 2719576

FICTITIOUS BUSINESS NAME STATEMENT

(1) FICTITIOUS BUSINESS NAME(s)

NOCK Investigations and Computer Forensica

(2) LOCATED AT 517 Seagate Drive 4270 Oceanside, CA 92049, San Diego County,

(3) THE FOLLOWING

National Chrissian Information Center,

Inc., 517 Seagate Drive, #270

Oceanside, CA 92049, California

(4) THIS BUSINESS IS REGISTERED BY THE FOLLOWING

National Chrissian Information Center,

(5) THE FIRST DAY OF BUSINESS WAS 07:19/2006

If declare that at information in this statement is true and correct (A registrant who declares as true any material matter oursuant to Section 179/13 of the Business and Professions code that the registrant knows to be false is guilty of a misoameanor purishable by a time not to exceed one thousand dodars (\$1.000).)

(6) Is losen A Travers, President, National Christian Information Center, Inc. This Statement was face with Recorde/County Cerk of SAN DIEGO

County on February 18, 2015.

NOTICE: In accordance with Subdivision (a) of Section 17920, where it expires 40 days after any changes in the facts set from in the statement pursuant to Section 17920 where it expires 40 days after any changes in the facts set from in the statement pursuant to Section 17910 other than a change in the residence accress of a registered owner. A New FictSous Business Name Statement must be filled before the expiration. The filling of this statement owner, A New FictSous Business Name Statement must be filled before the expiration. The state of a floor of the opinion of the

02/24/2015, 03/03/2015, 03/10/2015, 03/17/2015

Executed on: 03/17/2015 At Los Angeles, California

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature

* 4 0 0 0 0 0 3 7 0 4 1 1 8 *





## SECRETARY OF STATE

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That the attached transcript of ____ page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

JUN 2 0 2000

Secretary of State



In reply refer to 755:G :KSS

February 10, 2005

NATIONAL CHRISTIAN INFORMATION CENTER INC JOSEPH TRAVERS 34202 DEL OBISPO ST SPC 62 DANA POINT CA 92629-3918

Purpose

RELIGIOUS . :

Code Section

23701d

Form of Organization : Accounting Period Ending: Corporation

September 30

Organization Number

: 2238906

You are exempt from state franchise or income tax under the section of the Revenue and Taxation Code indicated above.

This decision is based on information you submitted and assumes that your present operations continue unchanged or conform to those proposed in your application. Any change in operation, character, or purpose of the organization must be reported immediately to this office so that we may determine the effect on your exempt status. Any change of name or address must also be reported.

In the event of a change in relevant statutory, administrative, judicial case law, a change in federal interpretation of federal law in cases where our opinion is based upon such an interpretation, or a change in the material facts or circumstances relating to your application upon which this opinion is based, this opinion may no longer be applicable. It is your responsibility to be aware of these changes should they occur. This paragraph constitutes written advice, other than a chief counsel ruling, within the meaning of Revenue and Taxation Code Section 21012(a)(2).

You may be required to file Form 199 (Exempt Organization Annual Information Return) on or before the 15th day of the 5th month (4 1/2 months) after the close of your accounting period. Please see annual instructions with forms for requirements.

You are not required to file state franchise or income tax returns unless you have income subject to the unrelated business income tax under Section 23731 of the Code. In this event, you are required to



# **Business Search - Entity Detail**

The California Business Search is updated daily and reflects work processed through Sunday, August 19, 2018 document Processing Times for the received dates of filings currently being processed. The data provided is certified record of an entity. Not all images are available online.

# C2238906 NATIONAL CHRISTIAN INFORMATION CENTER, INC.

Registration Date:

Jurisdiction:

**Entity Type:** 

Status:

**Agent for Service of Process:** 

**Entity Address:** 

**Entity Mailing Address:** 

06/14/2000

CALIFORNIA

DOMESTIC NONPROFIT

**ACTIVE** 

**ALEXANDRIA PHILLIPS** 

517 SEAGAZE DRIVE #270

**OCEANSIDE CA 92049** 

517 SEAGAZE DRIVE #270

**OCEANSIDE CA 92049** 

517 SEAGAZE DRIVE #270

**OCEANSIDE CA 92049** 

A Statement of Information is due EVERY EVEN-NUMBERED year beginning five months before and through the

Document Type	ÎÎ File Date	IJ PD
SI-COMPLETE	01/08/2018	no:
SI-COMPLETE	01/04/2016	TO S
REGISTRATION	06/14/2000	POF

^{*} Indicates the information is not contained in the California Secretary of State's database.

- If the status of the corporation is "Surrender," the agent for service of process is automatically revoked. Plea Corporations Code section 2114 for information relating to service upon corporations that have surrendered
- For information on checking or reserving a name, refer to Name Availability.
- If the image is not available online, for information on ordering a copy refer to information Requests.
- For information on ordering certificates, status reports, certified copies of documents and copies of documents available in the Business Search or to request a more extensive search for records, refer to <u>Information Requests</u>.
- For help with searching an entity name, refer to <u>Search Tips</u>.
- For descriptions of the various fields and status types, refer to <u>Frequently Asked Questions</u>.

certified record of an entity.

- Select an entity name below to view additional information. Results are listed alphabetically in ascending order by entity name, or you can select a column title to change the sort order.
- To refine the search results, enter a word or a string of words in the "Narrow search results" box. The "Narrow search results" will search on all fields of the initial search results.
- For information on checking or reserving a name, refer to Name Availability.
- For information on requesting a more extensive search, refer to Information Requests
- For help with searching an entity name, refer to <u>Search Tips</u>.
- For descriptions of the various fields and status types, refer to Frequently Asked Questions.

Results of search for Corporation Name keyword "National Christian Information Center Inc." returned 1 entity record (out of 1 record

Entity II	If Registration If Date	Status	Entity Name	Jurisdiction IT	If Agent for Service If of Process
C2238906	06/14/2000	ACTIVE	NATIONAL CHRISTIAN INFORMATION CENTER, INC.	CALIFORNIA	ALEXANDRIA PHILLIPS

**Modify Search** 

**New Search**